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HOGAN & HARTSON L.L.P.

500 SOUTH GRAND AVENUE
SUITE 1900
LOS ANGELES, CA 90071

Tel.: (213) 337-6700

Fax: (213) 337-6701

IMPORTANT NOTICE

TELECOPY/FACSIMILE COVER LETTER

FEB 03 2006

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TO: U.S. Patent and Trademark Office
Examiner: J.C. Norris
Art Unit: 2841

DATE: February 3, 2006

FROM: Lawrence J. McClure

TIME:

TOTAL NO. OF PAGES, INCLUDING COVER: 12

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MESSAGE:

RE: U.S. Patent Application Serial No.: 10/774,551, Our Ref. 81716.0120

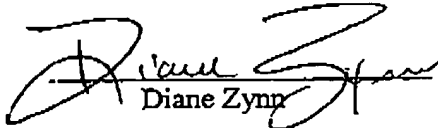
I hereby certify that the following documents:

- Amendment Under 37 C.F.R. § 1.116/Amendment Transmittal Letter
- Petition for Extension of Time (1 month)

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

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Diane Zynn

TELECOPY/FAX NUMBER: (571) 273-8300 - Art Unit 2841

CLIENT NUMBER: 81716.0120

ATTORNEY BILLING NUMBER: 1966

CONFIRMATION NUMBER: (please return fax to Diane Zynn)

FORM PTO-1083

81716.0120
Patent Application No. 10/774,551

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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CENTRAL FAX CENTER

In re application of:

Ken FURUKUWA

Serial No: 10/774,551

Filed: February 9, 2004

For: CERAMIC CIRCUIT BOARD AND METHOD FOR
MANUFACTURING THE SAME

Art Unit: 2841

Examiner: Jeremy C. Norris

FEB 03 2006

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Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	9	-	20	--	0	\$ 0
INDEPENDENT CLAIMS FEE	1	-	3	---	0	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
Independent Claim: 9					TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

-- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

--- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the fee of \$ for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Please charge the fee of \$120 for the one month extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON, L.L.P.

By:

Lawrence J. McElure
Registration No. 44,228
Attorney for Applicant(s)

Date: February 3, 2006

Biltmore Tower

500 South Grand Avenue, Suite 1900

Los Angeles, California 90071

Telephone: 213 337-6700

Facsimile: 213 337-6701